## PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPOND	y change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, muthave its own certificate of mailing or transmission.							
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01 FC:1501 1400.00 DA				An att					(Signature)
02 FC:1504	300.00 pa		PAOSMARK OFFICE		August 17, 2007				(Date)
APPLICATION NO.	FIZM & DAME		FIRST NAMED INVE			TOR ATTORNEY DOCKET N			CONFIRMATION NO.
10/643,853 08/19/2003 David Y. Chien PP16073.021 6313  FITLE OF INVENTION: POLYNUCLEOTIDES ENCODING A MULTIPLE EPITOPE FUSION ANTIGEN 23,00,16073,10 IN AN HCV  ANTIGEN/ANTIBODY COMBINATION ASSAY									
APPLN. TYPE	SMALL ENTITY	ISSU	JE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1400	\$300		\$0		\$1700	08/27/2007
. EXAM	A	RT UNIT	CLASS-SUBCLASS	S					
LUCAS, ZACHARIAH			1648	536-023720					
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ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  NOVARTIS VACCINES AND DIACNOSTICS THE EMPRESSION OF THE ORDER OF THE									
NOVARTIS VACCINES AND DIAGNOSTICS, INC. EMERYVILLE, CALIFORNIA									
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 KCorporation or other private group entity 🗀 Government									
la. The following fec(s) a  XX Issue Fee  XX Publication Fee (N  XX Advance Order - #	)	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  XX The Director is hereby authorized to charge alternative fee(s), any deficiency, or credit any overpayment, to Deposit Account Numbe 03-1664 (enclose an extra copy of this form).							
. Change in Entity Stat	us (from status indicated	above)		o respayment, to B	opou.	Trecount Trainec		(chelose an	extra copy of this form).
	SMALL ENTITY statu			☐ b. Applicant is no	longe	er claiming SMAL	L ENTI	TY status. See 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee and nterest as shown by the r	I Publication Fee (if requeecords of the United State	ired) wil es Patent	l not be accepted and Trademark	from anyone other the Office.	an the	e applicant; a regis	tered att	orney or agent; or the	assignee or other party in
Authorized Signature	Murcel			Date <u>Augus</u>	st 17	, 2007			
Typed or printed name <u>Marcella Lillis</u>				Registration No. 36,583					
his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and ubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete									

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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